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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/530,386			ing Date 27/2000	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR			UMBER FIL	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A	1	N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A		N/A		1	N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =			1	X \$ =		OR	x s =		
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =			1	X \$ =		1	X \$ =		
The specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$1:25 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(5) and 37 CPR 1.16(a)												
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL		
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMAL									ER THAN ALL ENTITY			
AMENDMENT	03/23/2012	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	- 14	Minus	20	= 0	]	X \$ =		OR	X \$60=	0	
	Independent (37 CFR 1.16(h))	· 4	Minus	4	- 0	]	X \$ =		OR	X \$250=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR	l		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,160))	*	Minus	**	-	]	x \$ =		OR	x s =		
	Independent (37 CFR I 16(h))		Minus	***	-	1	X \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1,16(s))					1	<u> </u>		l	<u> </u>		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	*If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner:  "If the "Righest Humber Freviously Paid For" IN THIS SPACE is less than 3, onter "3".  "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Righest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

The considered of information is equilibred, by the first of the considered of the c ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.